

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 242882US3CONT	
		First Inventor or Application Identifier Akira MATSUI	
		Title	BASE, DRUM, AND DRUM MOUNTING UNIT FOR MAGNETIC RECORDING REPRODUCING APPARATUS

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>			ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>			ACCOMPANYING APPLICATION PARTS
2. <input checked="" type="checkbox"/> Specification Total Sheets 33			7. <input checked="" type="checkbox"/> Assignment Papers (Reel/Frame 012242/0397) 8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 (2 pages) 9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 7			10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 3			12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small>			15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small>
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small>			16. <input checked="" type="checkbox"/> Other: Request for Priority
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			 01004 U.S. PTO 10/682190 101003
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>			
a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification or Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper			
c. <input type="checkbox"/> Statements verifying identity of above copies			

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation Divisional Continuation-in-part (CIP) of prior application no.: 09/812,547

Prior application information: Examiner: WATKO, J. A. Group Art Unit: 2652

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

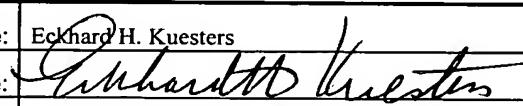
18. CORRESPONDENCE ADDRESS

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Docket No. 242882US3CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Akira MATSUI, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: BASE, DRUM, AND DRUM MOUNTING UNIT FOR MAGNETIC RECORDING REPRODUCING APPARATUS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	5 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	4 - 3 =	1	x \$86 =	\$86.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
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			BASIC FEE	\$770.00
			TOTAL OF ABOVE CALCULATIONS	\$856.00
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<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
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- Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.
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Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
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(OSMMN 05/03)

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